# Vector-Borne Disease

## Weekly Surveillance Report

Center for Acute Disease Epidemiology | Acute Disease Prevention and Emergency Response & EH | West Nile Virus Website

All data presented in this report are provisional and may change as additional reports are received

**Date Issued: July 5, 2019**

## West Nile Virus (WNV)

WNV is endemic in Iowa and activity usually peaks in late summer and early fall. IDPH works in collaboration with Local Public Health (LPH) and other appropriate partners to investigate all reported cases.

In 2018, Iowa experienced an increase in WNV activity and 104 human cases were identified. This is the highest number since 2003. Thus far in 2019, two horses and one mosquito sample have tested positive for WNV [Table 1].

**Table 1. Human /Equine/Mosquito Surveillance, 2019 Positive Samples**

| | | | | Mosquitoes |
|---|---|---|---|---|
| **County** | **Human** | **Blood Donor** | **Horse** | ***Culex restuans*** |
| Davis | 0 | 0 | 1 | 0 |
| Polk | 0 | 0 | 0 | 1 |
| Union | 0 | 0 | 1 | 0 |
| **Total** | **0** | **0** | **2** | **1** |

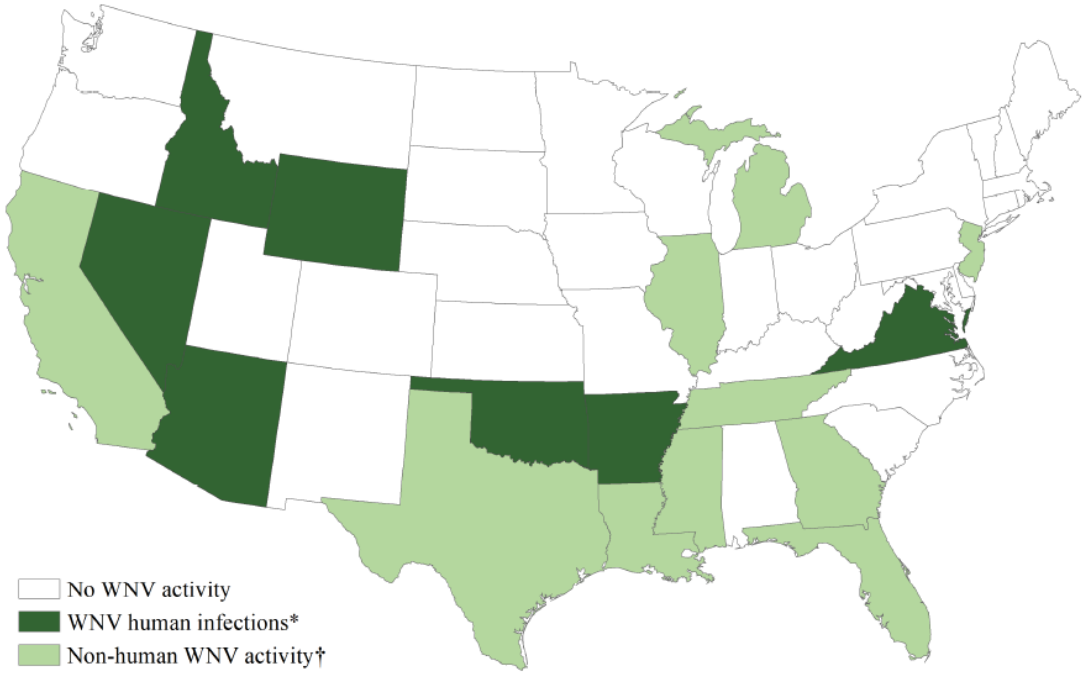
### National WNV Activity:

As of June 25th, 52 counties from 17 states have reported WNV activity to ArboNET for 2019, including seven states with reported WNV human infections (i.e., disease cases or viremic blood donors) and 10 additional states with reported WNV activity in non-human species only (i.e., veterinary cases, mosquito pools, dead birds, or sentinel animals) [Figure 1].

To date, 10 human WNV disease cases have been reported from seven counties in seven states. Of the 10 reported cases, six (60%) were classified as neuroinvasive disease (e.g., meningitis or encephalitis) and four (40%) were classified as non-neuroinvasive disease [Figure 2]. Dates of illness onset for cases ranged from January-June [Figure 3].

Overall, one WNV PVD has been reported from one state (Arizona).

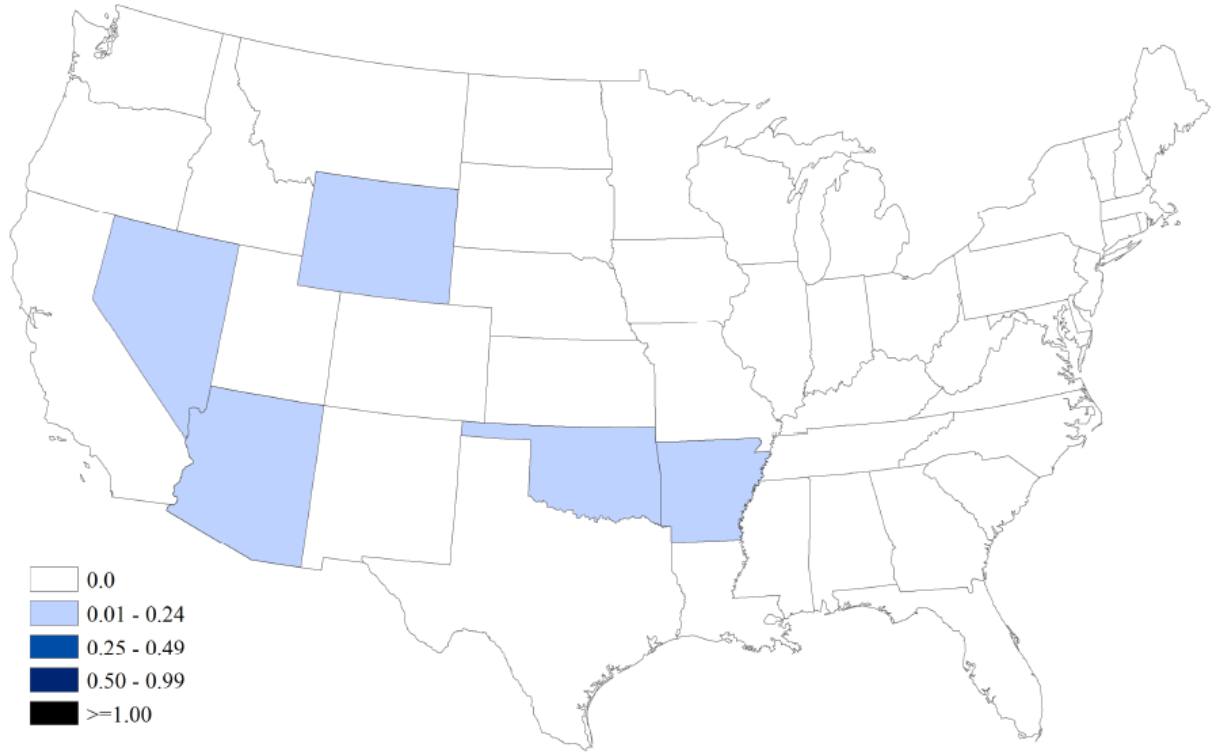
**Figure 1. WNV activity reported to ArboNET, by state – United States, 2019 (as of June 25, 2019)**




*WNV human disease cases or presumptive viremic blood donors. Presumptive viremic blood donors have a positive screening test which has not necessarily been confirmed.

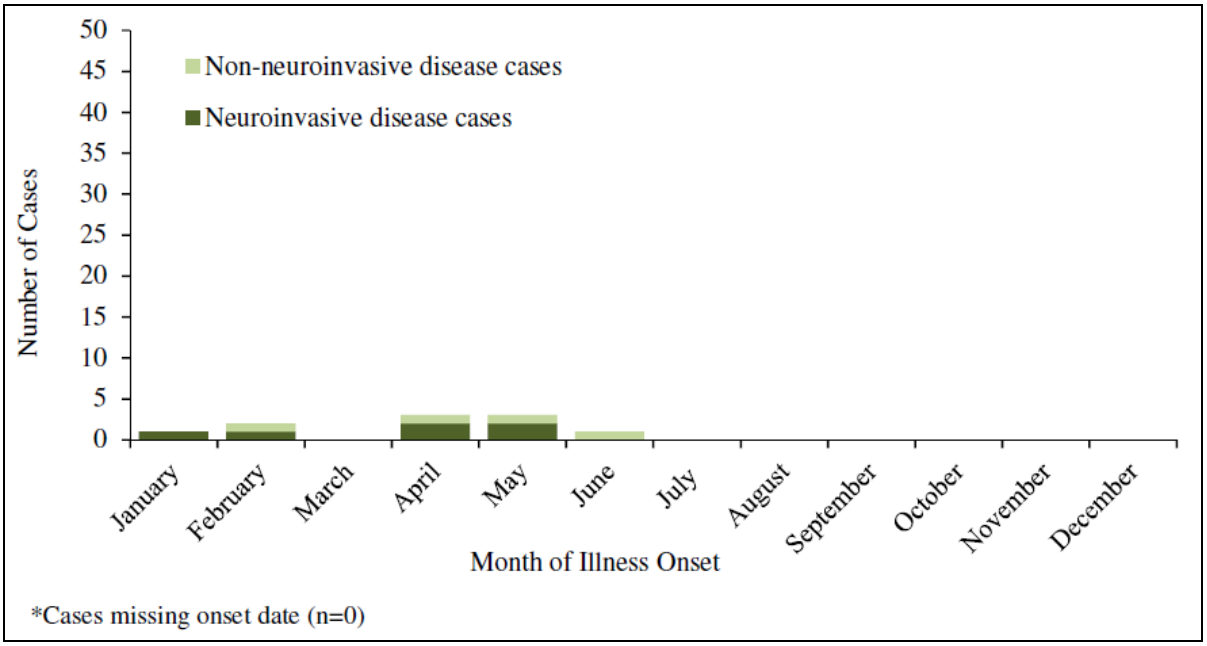
†WNV veterinary disease cases, or infections in mosquitoes, birds, or sentinel animals

**Figure 2. WNV neuroinvasive disease incidence* reported to ArboNET, by state – United States, 2019 (as of June 25, 2019)**




*Incidence per 100,000 population

**Figure 3. WNV disease cases reported to ArboNET, by month of onset*– United States, 2019 (as of June 25, 2019)**




*Cases missing onset date (n=0)

## Mosquito Surveillance

IDPH in collaboration with the State Hygienic Laboratory (SHL), Iowa State University (ISU), and local public environmental health partners conducts ecological surveillance in 16 counties across the state by monitoring mosquitoes and testing for WNV infected populations.

**Table 2. 2019 mosquitoes tested for West Nile virus**

| Species | # of Samples Tested | WNV Negative | WNV Positive |
|---|---|---|---|
| ***Cx. pipiens*** | 55 | 55 | 0 |
| ***Cx. pipiens* group** | 171 | 171 | 0 |
| ***Cx. tarsalis*** | 7 | 7 | 0 |
| ***Cx. restuans*** | 217 | 216 | 1 |
| ***Cx. territans*** | 6 | 6 | 0 |
| ***Cx. erraticus*** | 0 | 0 | 0 |
| ***Cx. salinarius*** | 5 | 5 | 0 |
| ***Ae. japonicus*** | 0 | 0 | 0 |
| ***An. punctipennis*** | 0 | 0 | 0 |
| ***Ae. atropalpus*** | 0 | 0 | 0 |
| ***Ae. sticticus*** | 0 | 0 | 0 |
| ***Ae. triseriatus*** | 0 | 0 | 0 |
| **Total** | **461** | **460** | **1** |

In addition to viral testing for WNV, the population of mosquitoes in Iowa is monitored through trapping activities. All trapped mosquitoes are sorted by species. The figure [Figure 4] below shows where and when Aedes albopictus mosquitoes were detected 2017-2019.

**Figure 4. *Aedes albopictus* identified in Iowa, 2017-2019**

## Malaria

Malaria is a serious and sometimes fatal disease caused by a parasite that commonly infects *Anopheles* mosquitoes. Malaria is spread to humans by the bite of the infected female mosquito. Only *Anopheles* mosquitoes can transmit malaria and they must have been infected through a previous blood meal taken from an infected person.

Nine cases of malaria have been reported in Iowa. Cases are in travelers and immigrants returning from parts of the world where malaria transmission occurs. In 2018, 22 cases of malaria were reported to IDPH.

## Rocky Mountain spotted fever (RMSF)

American dog ticks are carriers of *Rickettsia rickettsii*, the bacteria that causes RMSF. The American dog tick is the most common species of tick in Iowa and can be found in every county in the state. The tick is most active late March through August.

Two cases of RMSF have been reported in Iowa. In 2018, 22 cases of RMSF were reported to IDPH.

## Ehrlichiosis/Anaplasmosis

There are at least three species of bacteria responsible for ehrlichiosis/anaplasmosis in the United States: *Ehrlichia chaffeensis, Ehrlichia ewingii, and Anaplasma phagocytophilum*. Ehrlichiae are transmitted by the bite of an infected lone star tick (*Amblyomma americanum*) which is found in Iowa. *A. phagocytophilum* is transmitted by the bite of an infected blacklegged tick (or deer tick, *Ixodes scapularis*) in Iowa. The clinical signs and symptoms of these infections are similar.

Eight cases of ehrlichiosis/anaplasmosis have been reported in Iowa. In 2018, 27 cases of ehrlichiosis/anaplasmosis were reported to IDPH.

## Lyme

Lyme disease is caused by *Borrelia burgdorferi* and in Iowa is transmitted to humans by the bite of an infected tick, the blacklegged tick (or deer tick, *Ixodes scapularis*). Ticks are most likely to spread the Lyme disease bacterium during their pre-adult stage (nymph). They are most common between May and July and found in tall grasses and brush of wooded areas.

As of July 5th, 91 confirmed and probable cases of Lyme disease have been reported in Iowa [Figure 5]. In 2018, 284 cases of Lyme disease were reported to IDPH.

**Figure 5. 2019 Lyme disease case count and incidence rate by county of residence.**